

DEPARTMENT OF SOCIAL SERVICES

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Medicaid citizenship and identity verification guidelines released

- Revised requirements take effect July 1 -

Richmond – The Federal Deficit Reduction Act (DRA) of 2005 requires Medicaid applicants to provide documentation of their citizenship and identity beginning July 1, 2006. For current recipients, the documentation must be provided at the annual review of their eligibility. Prior to the enactment of the DRA, a declaration of citizenship from a Medicaid applicant was sufficient.

"The new requirements may present a significant challenge to some individuals who currently receive Medicaid," said Virginia Department of Social Services (VDSS) Commissioner Anthony Conyers Jr. "We want to assure these recipients that we are working closely with local departments of social services, state agencies and our community partners to make this information as easily accessible as possible."

VDSS recently received guidance from the Centers for Medicare and Medicaid Services (CMS) regarding the implementation of these new requirements. A <u>Proof of U.S. Citizenship and Identity for Medicaid Guide</u>, which outlines agencies where citizenship and identity documents required by CMS can be obtained, information on obtaining <u>Virginia birth certificates</u>, as well as other information regarding Medicaid is available on the <u>VDSS Web site</u>.

"Our goal is to inform recipients now of these changes and communicate what is required, so they can prepare for their renewal process when it comes due within the next year," said Thomas Steinhauser, acting director of the VDSS Division of Benefit Programs.

Eligibility workers at local departments of social services are currently attending policy and procedural training on these citizenship and identity changes, as well as other revisions to Medicaid eligibility policy resulting from the DRA. Eligibility workers are also reviewing current Medicaid recipient files to see if existing U.S. citizenship documentation can be found. Additionally, VDSS is working with other state agencies, providers and advocacy groups on processes that will facilitate verification requirements for Medicaid applicants and recipients.

"Medicaid recipients will be given a reasonable opportunity to present the documentation that is needed," said Steinhauser. "Before anyone's coverage can be terminated, supervisory approval will be required to ensure all courses of action available are taken to assist in locating documentation."

"Our goal is to assist our current Medicaid enrollees so they will not lose their benefits because of the inability to obtain documentation," said Commissioner Conyers.